

Sharing the Challenge: CNA Recruitment & Retention

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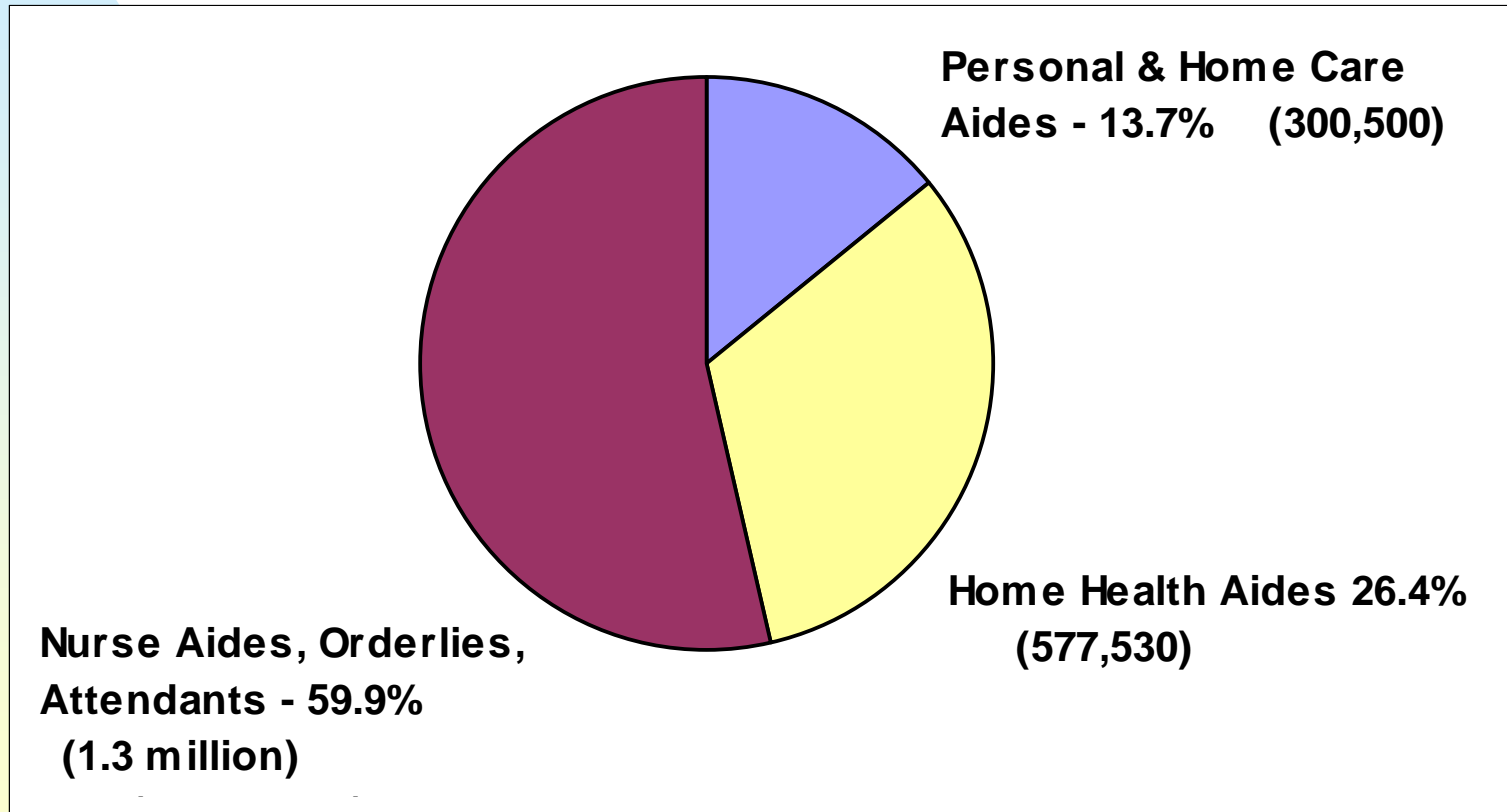
Setting the Stage

- Shortages of direct care workers is a major LTC workforce issue for North Carolina and the vast majority of states
- States invest significant public funds on long-term care related services that rely heavily on the direct care workforce.
 - 👉 NC spends over \$2 billion on these services

Setting the Stage --Cont.

- Personal & Home Care Aides rank in top 10 both in terms of fastest growing jobs and jobs with the largest projected growth.
- Nurse Aides rank 12th in terms of largest job growth

National Distribution of Aide Workforce -- Approximately 2.2 Million -- '99



The North Carolina Picture

- As expected, shortages continue in NC and the nation in spite of rising unemployment rates
 - ☞ NC's unemployment rate up from 2.8% in April '99 to 5.3% in July 2001
- Shortages of direct care workers continue to exist in all LTC related settings
 - ◆ As part of Olmstead Plan and IOM LTC report, NC making effort to increase Home & Comm. Services

NC Picture -- Cont.

- Although NC is training many new Nurse Aides, they are not staying in the field
 - ◆ 59% of NC's Nurse Aide Registry is inactive
- Analysis of Registry data showed inactive aides earn more and have more stable employment than active aides

NC Picture -- Cont.

- Annual Turnover Rates
 - ◆ **110% -- nursing homes**
 - ◆ **119% -- assisted living facilities**
 - ◆ **58% -- home care settings**
 - ☞ 20% of home care agencies report turnover rates of 60% -300%
- Between 1998 - 2008 NC projected to need approximately 31,000 more direct care workers

Median Aide Wages -- 1999

<u>Job Category</u>	<u>NC</u>		<u>Nation</u>	
	<u>Hr.</u>	<u>Annual</u>	<u>Hr.</u>	<u>Annual</u>
Nurse Aides, Orderlies & Attend.	\$7.88	\$16,390 191%	\$8.29	\$17,240 201%
Home Health Aides	\$7.60	\$15,808 184%	\$8.21	\$17,080 199%
Personal & Home Care Aides	\$7.11	\$14,788 172%	\$7.50	\$15,590 181%

Federal Poverty Level: 1: \$8,590 2: \$11,610 3: \$14,630



Why Do NC and Other States Have a Stake In this Issue?

- States and providers must work together to help ensure an adequate, stable and high quality workforce to meet needs of public and private pay clients.
- A majority of states are taking steps intended to expand & stabilize this workforce

Major Types of Action being Taken by States

- Efforts to improve wages & benefits
- Efforts to broaden the pool of potential workers
- Efforts to provide career ladder options
- New service models -- (e.g. consumer directed care, task specific workers)
- Public education, awareness and recognition
- NC IS LOOKING AT ALL OF THESE AREAS



What NC Is Doing from a Public Policy Perspective

- Concluding a 3 year grant from the Kate B. Reynolds Charitable Trust to:
 - ◆ Collect and analyze nurse aide/aide workforce data
 - ◆ Develop additional training programs to address identified gaps in initial Nurse Aide I (NA I) training
 - ◆ Pilot test financial and other incentives for aides -- in exchange for staying w/employer for some time period. (Based on TEACH model)
 - ◆ Conduct public education and awareness activities

What NC Is Doing-- Cont.

- G.A. appropriated \$500K to develop & implement on-site Internet training or other innovative training programs to improve recruitment/retention of NA's in nursing homes.
- Among other items developed:
 - ◆ Print Media, PSA's, CD-ROM and other tools being used for education and recruitment
 - ◆ supervisory training for RN's
 - ◆ development of a mentoring program for NA's

What NC is Doing -- Cont.

- The NC Institute of Medicine's LTC Task Force builds upon grant efforts and includes recommendations to:
 - ☞ Appropriate funds for a labor enhancement for Medicaid services that rely on aide workers
 - ☞ Appropriate funds to support continuing education and professional development combined with financial and other incentives in exchange for staying with current employer for some specified time period
 - ☞ Appropriate funds to establish a career ladder and develop associated curricula

LTC Task Force Recommendations-- Cont..

- Appropriate funds for on-going data collection and analysis efforts related to NC's aide workforce
- **Legislation was introduced during the current session of the General Assembly to address all of the above Task Force recommendations -- (SB 180 & HB 244)**
 - 👉 No action taken due to budget situation

Other LTC Task Force Recommendations

- DHHS and the Department of Insurance should explore ways to establish a group health insurance purchasing arrangement for staff, including paraprofessionals working in various long-term care settings.
- NC should establish a Legislative Study Commission to examine workforce shortages among the professional & paraprofessional long-term care workforce.

In Spite of NC's Budget Situation -- DHHS Can and Must Move Forward

- DHHS will continue to address workforce issues -- including:
 - ◆ Use Nursing Home Civil Penalty Fine Money -- to support continuing education/professional development for nurse aides working in nursing homes.
 - ◆ Continue to send newly registered Nurse Aides info about the Children's Health Insurance Program and expand this effort to target other direct care workers.

DHHS Moving Forward -- Cont.

- ◆ Examine options for group health insurance purchasing arrangements for workers across LTC settings (home care, assisted living, nursing homes)
- ◆ Develop a career ladder option for NA I's in nursing homes who want to advance in their long-term care careers but not interested in becoming an LPN or other licensed health care worker.
- ◆ Consider potential of using Medication Tech's or single task/limited task workers

Moving Forward--Cont.

- ◆ Collect and analyze basic turnover data on LTC aide workforce through licensure application process to determine if making any progress in size and stability of aide workforce.
- DFS Now working with IOA to update analysis of Nurse Aide Registry data --
 - ◆ wages, job stability, employment sectors where working (for both active and inactive Nurse Aides-- 2001 data)
 - ◆ IOA is planning to develop a protocol to help other states to merge Registry data with Department of Labor data to conduct similar analysis.

Moving Forward--Cont.

- **Federal funding awarded to DHHS for a “Real Choice Systems Change” grant .**
 - ◆ **\$1.6 million over 3 years -- Major activities include:**
 - ☞ Development of a “consumer directed care” model will be a major item
 - many states looking at as a way to be more responsive to consumer preferences and broaden the pool of potential workers. Will need to develop necessary accountability measures
 - ☞ Development of career ladder options
 - ☞ On-going data analysis efforts through IOA and collecting basic data on aide workforce through licensure applications.

Moving Forward--Cont.

- Continue to examine successful strategies used by other states
- Consider potential feasibility of using Medication Tech's to dispense medications in Nursing Homes under RN supervision (as opposed to requiring meds be administered by RN's)
- Allow single/limited task workers (i.e. feeding, grooming) --may be more time/cost efficient and would potentially broaden pool of potential workers

Conclusion

- NC has a vested interest in ensuring we have a high quality, adequate, and stable supply of nurse aides and other direct care workers.
- Providers too must (and are) taking responsibility to address this problem
 - ◆ It's not only about money but wages and benefits are an issue
 - ◆ Much can be done by individual providers to address working environment, staff appreciation, job satisfaction and performance, input into care, wages, etc.

Provider Efforts

- Providers are also working hard to address this issue through efforts such as:
 - ◆ mentoring/buddy programs
 - ◆ more flexible scheduling/self-scheduling
 - ◆ recognition/appreciation efforts
 - ◆ establishing in-house pools for overtime/gaps in staffing
 - ◆ attendance awards
 - ◆ in-service training opportunities, more opportunities for input, etc.

Consumers & Families Can Help Too

A couple ways to help include:

- ◆ Help educate others about this shortage and its impact on the quality of long-term care
- ◆ Take a moment to say “thank you” to aide workers (and other LTC workers)
- ◆ Volunteer or get involved in other ways (such as today's effort)

Conclusion -- Cont.

- From a public policy perspective, NC has to be willing to think creatively about ways to effectively address the problem
- We must develop on-going capacity to track the impact of strategies implemented.
- We can't talk about LTC reform & quality improvement, more care choices, etc. -- without making sure we have the necessary workforce.



DFS Web Address

- **<http://facility-services.state.nc.us>**
 - ◆ Click on the “for providers” box
 - ◆ Scroll Down to documents of interest
 - ☞ Sept. 2001 results of national survey of states on career ladder and other initiatives to address aide recruitment/retention